

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM 100-00)**

SERIAL NO.  
**657193**  
ATTORNEY

FILED DATE  
**9-7-00**

**CLAIMS**

	AS FILED		AFTER 1st REDUCTION		AFTER 2nd REDUCTION	
	NO.	DEC.	NO.	DEC.	NO.	DEC.
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